



Los Angeles Regional Water Quality Control Board

BOARD ORDER TRANSFER REQUEST FORM

Boar Order No	CI No	
Facility Location:		
Street Address	City	Zip
I request the transfer of the existing waste discharge recontained in the above-referenced Board Order in acco		
TRANSFER FROM:	TRANSFER TO:	
Former Facility Name	New Facility Name	
Former Property Owner	New Property Owner	
Former Operator	New Operator	
I understand that I am responsible for compliance with the waste discharge from this facility. I certify that:	the Board Order and will	be billed an annual fee for
I have reviewed the Report of Waste Dischargea	nd the Board Order;	
 The facility construction and discharges from the 	site have not substantia	lly changed; and
I will notify the Board of any material change in the of waste discharge or any future change in the factors.		he amount, type or manner
Signature (New Owner/Authorized Representative)	Company name, if appropriate	
Print Name (New Owner/Authorized Representative)	Telephone No.	Date
Title	 Email	
Mailing Address:		
Street Address	City	Zip
Facility Contact Person	Telephone No.	Email
Facility Contact Mailing Address:		
Street Address	City	Zip
Lawrence Yee, chair Renei	Purdy, executive office	R